When the Idaho Cooperator Certification Form (ICCF) has been completed, no other agreement (or EERA) is necessary.

1 IDI Aroa/District/Association	19					
IDL Area/District/Association Name and Address:		Agreement No		2. EFFECTIVE DATES OF CERTIFICATION		
Southern Idaho Timber Protection Association, Inc 555 Deinahrd Lane		D-980-17-001				
McCall, ID 83638	C.	Phone: 208-6	34-2268		a. Beginning: 6/16/2017	
	d.	FAX: 208-634	1-4188		b. Ending: 6/16/2019	
FIRE DEPARTMENT Name and Address: McCall Fire Protection District PO Box 1597		ORDERING DISPATCH CENTER ID-PAC				
201 Deinhard Lane McCall, ID 83638			208-634-7070 208-634-7070			
		Cell Phone: 2				
		AX: 208-634	-5360			
5. THE FOLLOWING EQUIPMENT IS BEING PROV	IDED:			6. OPERAT	ING SUPPLIES	
☐ Fully Operated (Includes Personnel & Equipment) ☐ Unoperated (Personnel Costs Billed Seperately)			☐ Provided I		by Incident	
ITEM DESCRIPTION - Provide: Make, Model, Yes License Plate No., and List NWCG Equipment Ty	8. HRLY/DAILY/ BASIS	/MILEAGE/SHIFT				
Description	Туре	Minimum Staff	Rate	Unit	9. SPECIAL	
ALS/BLS Non-Transport Medical Vehicle 51			\$33.00	per hr.	20 0	
Ford, Expedition 4x4, 2005, 1FMPU16545LA50722 Plate # F1977		1	\$0.00		Hourly vehicle, unoperated, rate is the same for ALS or BLS non-	
			\$0.00		transport.	
ALS/BLS Non-Transport Medical Vehicle 52 Ford, F-350 4x4, 2008, 1FTWW31RX8EE38000 Plate # F2851		1	\$33.00	per hr.	Haudin a bist	
			\$0.00		Hourly vehicle, unoperated, rate is the same for ALS or BLS non-	
			\$0.00		transport.	
Engine #11, Pierce Dash, 1994 4P1CT02D6SA000156 Plate # F786	E2	3	\$101.00	HourlyUnOp		
			\$1,414.00	DailyUnOp	May be ordered as E1, if ordered as E1 four personnel are required,	
			\$2,333.00	DailyUnOp2	rate will be based on request	
Engine #12, E-One, 1986 1PGBA9RM8GRLZ3105 Plate # F861		3	\$101.00	HourlyUnOp	**************************************	
	E2		\$1,414.00	DailyUnOp	May be ordered as E1, if ordered as E1 four personnel are required,	
			\$2,333.00	DailyUnOp2	rate will be based on request	
Support Water Tender AM General, M915A1, 2010 1UTSH6685ESOO1410 Plate # F2952	S2	1	\$95.00	HourlyUnOp	May be ordered as a Type 1	
			\$1,330.00	DailyUnOp	Tactical Water Tender, 2 personnel required rate wil be	
			\$2,195.00	DailyUnOp2	based on request	
ALS Ambulance (M53) Ford, F350, 1996, 1FDKF38F1VEA43706 Plate # F1607	T1 ALS	2	\$65.00	HourlyUnOp		
			\$910.00	DailyUnOp	May be ordered as a BLS Type 3 Ambulance rate will be based on	
			\$1,502.00	DailyUnOp2	request	
			\$0.00			
			\$0.00			
			\$0.00			

Description	Туре	Minimum Staff	Rate	Unit	Special
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		\$0.00			
SPECIAL PROVISIONS - <u>Hourly rate applies t</u> ater Handling Equipment Rates" for first/last day. C partial days.	o first and la Chase/Comma	st day not to example state and vehicles, wh	reced delle t-	When reassigned to incident, are paid a	to another incident Refer to "D at a Daily Rate with no reduction
SIGNATURE OF FIRE CHIEF OR AUTHORIZE	D AGENT	12.	SIGNATURE OF	FIRE WARDEN OF	R AUTHORIZED AGENT
PRINT NAME AND TITLE Nork Billmire Chief	14. DATE	15.	PRINT NAME AN	DTITLE STOMP	16. DATE 6.15.17

IDAHO COOPERATOR CERTIFICATION FORM (ICCF)

- A. The equipment listed on the Idaho ICCF meets all of the minimum requirements found in the Idaho Fire Service Organization Rate Book (FSO Rate Book) for use and operation of the equipment type identified.
- B. Failure to accurately classify the equipment type as described in the FSO Rate Book shall result in a downgrade of typing and a reduction in rate to the type level the equipment meets as set forth in the FSO Rate Book. Failure of the equipment described herein to meet all FSO Rate Book requirements, or to provide the qualified personnel or equipment within 24 hours, will be cause for release and return to point of hire in pay status.
- C. It is agreed that the hiring entity may inspect the listed equipment and the appropriate training records. These inspections may be done preseason or at the incident during fire season.
- D. A copy of this certification shall be provided to the Finance Section Chief, or their designated representative, immediately upon arrival at the incident. When the Idaho Cooperator Certification Form (ICCF) has been completed, **no other agreement (or EERA) is necessary**.
- E. The individuals listed on the Idaho Cooperation Certification Form Resources, Appendix 1 (page 2 of 8), meet all of the requirements for the position(s) listed in accordance with National Wildfire Coordinating Group (NWCG), National Incident Management System Wildland Fire Qualifications System Guide, PMS 310-1, or NFPA Equivalency, and Idaho EMS License. Operators must possess a valid Driver's License and have the knowledge, skills, and abilities to operate the type and class of equipment listed herein.

I certify that the equipment and personnel listed herein meet the minimum resource typing standards as shown in the Idaho Fire Service Organization Rate Book. I hereby certify that I am authorized to sign this Idaho Cooperator Certification Form.

Fire Chief (Signature)	Date 6/8/17
The Office (dignature)	Date
Mark Billmire Fire Chief Name (Printed)	
McCall Fire Protection District Fire Department Name (Printed)	

Idaho Cooperator Certification Form (ICCF) Resources

Name

Qualification(s)/Licenses (NWCG/NFPA/EMS)

Jonathan Charles Metz	FF1, EMPF
Shaun Beau Frick	FF1, EMPF
Freddie Van Middendorp	FF1, EMPF
August Cleveland Wheeler	FF1, EMPF
Matthew Robert Mutert	FF2
Jay Gordon Mentzer	FF1, EMPF
Jeremy S. Olson	FF1, AEMF
Michael Spenser Buhler	FF1, EMPF
Graham Joseph Pinard	FF1, AEMF
Brandon Lee Swain	FF1, EMTF
Jennifer Kay Bisom	FF1, EMTF
Jason Edward Class	FF1, EMTF
Jordan Ockunzzi	FF1, EMPF
Mark Roy Billmire	FF1, AEMF
James Michael Corbet	FF2, EMTF
Heather Elizabeth Thiry	FF1, EMPF